



**Candidate**  
**Signature Authorization**  
for Electronic Financial Disclosure

I, \_\_\_\_\_,  
(name of Candidate)

\_\_\_\_\_  
(address, city, state, zip)

\_\_\_\_\_  
(phone number)

\_\_\_\_\_  
(e-mail address)

candidate for \_\_\_\_\_ office, District # \_\_\_\_\_  
(please print name of office)

affirm that reports of Contributions and Expenditures  
filed electronically with the Lieutenant Governor's Office, Elections Division,  
using the Utah Reporting System (URS), are complete,  
true and correct to the best of my knowledge and in accordance with Utah Code Section 20A-11.

I authorize the Lt. Governor's Office to accept my reports filed electronically.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

**To File this Form**

Mail or deliver to  
Lieutenant Governor's Office  
Utah State Capitol Complex  
East Office Building, Suite E325  
Salt Lake City, UT 84114-2325  
Fax (801) 538-1133

**For More Information**

Contact the Elections Office  
(801) 538-1041  
1-800-995-VOTE (8683)  
[elections@utah.gov](mailto:elections@utah.gov)

3/04

**For Office Use Only**

\_\_\_\_ Entered

Date Received